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SOCIAL WORKERS' KNOWLEDGE OF SUBSTANCE ABUSE

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Mirta Escobedo Johnson

September 2007

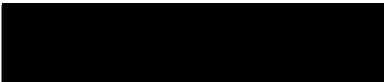
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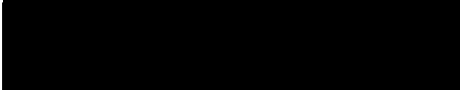
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ABSTRACT

This research project focuses on Child Welfare Social Workers' knowledge of substance abuse. The social workers for this study were selected from The Department of Children's Services (DCS) in San Bernardino, County.

In chapter one the assessment process of the project is introduced. This chapter contains information supporting the study's validity based on the paradigm chosen, the theoretical approach as well as any issues related to micro or macro practice.

Chapter two the engagement process describes the selection of the research site and the selection process for the subjects. It describes the engagement strategies, and addresses diversity, ethical as well as political issues.

Chapter three addresses the implementation of the project. This chapter contains the selection of the participants, and how the data was gathered.

Chapter four contains the evaluation process. This chapter addresses data analysis and interpretation; as well as any implications found related to micro and macro practice.

Chapter Five contains the termination and follow up of the study. This chapter focuses on communicating the findings of the study to the research site and the study participants.

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CHAPTER ONE

ASSESSMENT

Introduction

This chapter describes the positivist paradigm, and its functions. The positivist paradigm assumes that questions and hypotheses about causes and correlations are stated before any data is gathered. This paradigm uses designs that addresses explanations or descriptions. Explanations are causal questions, and descriptions are correlation questions. Independent variables (the cause) and dependent variables (the effect) are studies to measure the predictive link between the two (Morris, 2006).

Research Focus

This research project focused on substance abuse knowledge among child welfare workers. The child welfare system continues to face issues related to chemically dependent families. Hundreds of children nation wide are affected by family issues and dysfunction, violence, homelessness and poverty. Experts in the field of social work believe that there is a strong correlation between child abuse and substance abuse (CWLA, 1997).

Therefore, it is imperative that social workers that come in contact with substance abusing parents be able to identify substance abuse traits and implications. The child welfare league of America suggests that social workers need to be able to assess substance abuse problems in a wider context. They need to focus on family functioning and behavior; they need to address issues of family support and community resources.

Additionally, according to Thomas Gregoire (1994), the Department of Health and Human Services estimates that 50% of all child abuse cases in the U.S., are related to substance abuse. He also reports that social workers do not have the proper education or knowledge needed to work with substance abusing parents. He emphasizes that increasing the worker's knowledge in substance abuse through continuation of proper training would address the deficit in this area.

Paradigm and Rationale for Chosen Paradigm

The positivist paradigm was chosen for this study since its approach to research "states that questions and hypothesis about causes and correlations be made in advance of data collection and that they be the subject

to testing under controlled conditions," (Morris, 2005, p. 11). The appropriate paradigm for this research study was the positivist paradigm since a question was formulated and a hypothesis was offered about the answer to that question.

The researcher selected this paradigm in order to measure social worker's knowledge of substance abuse within the welfare system. The intent of this project was to find out if social workers participating in this project were in need of extensive training in substance abuse or they may possess enough knowledge that further training is not needed.

The hypothesis shows the relationship between the question to be measured and the variables that would be tested. The variable to be measured was the independent (education) and dependent (Knowledge of substance abuse variables).

Literature Review

Competence of Social Workers in Substance Abuse

Social workers usually encounter substance abusers in their work in child welfare, employee assistance programs, hospitals and community based services. They

often provide assessments and referrals to programs in their community and appear to be the ones that encounter more substance-abusing clients than any other helping profession.

Social workers involved in providing services to substance abusing clients need to have a more comprehensive knowledge in this subject. These workers need to have substance abuse knowledge, even if their job is not in a substance abuse field. Clients with substance abuse problems tend to access a variety of community services thus giving an indication that social workers need to be properly trained to identify the client's needs (Smith, Whitaker, & Weismiller, 2006).

Most child welfare workers seem to recognize the relationship between child abuse and substance abuse. Parents that maltreat their children tend to be illusive during child abuse investigations because not all investigations of child abuse carefully screen for substance abuse. Social workers in child welfare are offered substance abuse training by their employers to gain some knowledge on the implications of the use and abuse of drugs. However, most workers' knowledge in identifying significant drug abuse traits among their

clients is limited. This negatively affects the type of assistance they can provide to their clients for their recovery process (Rittner & Dozier, 2000).

Estimates of the rate of substance abuse in child welfare populations vary from 30% to over 80% of parents. Substance abusing parents tend to be problematic for case workers. These parents are likely to be non-compliant with court-ordered services and make service delivery difficult. Additionally, most case workers have had very little training in identifying substance abuse and even less training on intervention techniques (Hohman, 1998).

Referrals to Substance Abuse Treatment Programs

According to Gregoire and Shultz (2001), most caseworkers refer substance-abusing parents to treatment based on the workers' professional judgment. Workers do not utilize any special training or use any particular standardized assessment tools. In the research conducted by the authors of this article, an assessment tool was implemented in the case plan of substance abusing parents in a child welfare agency. According to the researchers, parents that completed the assessment and were involved in some treatment program had higher rates of post-referral sobriety than those who did not complete

either. The results provide a strong indication that assessment tools for substance abuse are extremely useful for the development of the case plan as well as helping to identify the correct treatment plan for the substance abusing client. The use of validated assessment tools by trained caseworkers will only strengthen the positive outcomes of sobriety with substance abusing parents. Social workers who find evidence of abuse or neglect related to substance abuse in their cases have to make a recommendation for corrective action by the abusers. Social workers need to be aware of optimal and available resources, services, supports and treatments. Most social workers deal with substance abuse problems in their practice and many social workers indicate that a need for more training in substance abuse is necessary (Lundgren, Schilling, & Peloquin, 2005).

Research studies also estimate that social workers are often described as having negative responses to substance abusing clients. Additionally, workers avoid working with these parents, fail to identify their substance abuse problems, fail to refer them to appropriate treatments and are pessimistic on the prognosis for recovery. According to research findings

substance abuse training increases social workers' sense of security and validates their helping roles with clients. The amount of training significantly offers competence when comparing groups of workers that are sufficiently trained in substance abuse verses those that are not fully trained (Amodeo & Fassler, 2000).

Substance Abuse Assessments

It seems that child welfare workers need to be better informed and educated about substance abuse problems before, during and after treatment. If social workers are able to deal with all levels of drug use and abuse, and are able to make appropriate assessments of such problems, they will provide better service to substance abusing clients. The high rate of substance abuse in child welfare cases requires professional social workers to determine when it is safe to reunify children with the substance abusive parents.

Parents recovering from substance abuse disorders are under pressure to learn the necessary skills for effective parenting. The parents recovering from alcohol and drug abuse face multiple challenges, including systemic obstacles, negative social attitudes, and traumatic personal histories. One of the systemic

problems that parents face is child welfare workers' lack of skills, knowledge or experience in working with substance abusive parents (Karoll & Poertner, 2003).

Additionally, in many settings social workers are the first to encounter clients with substance abuse problems. Social workers in child welfare, family services or community based services, serve as key assessment and referral for many community services. All of these situations offer the social workers with the opportunity to assess and identify problems related to chemical dependency.

However, many social workers have had little training in assessment and identification of substance abuse problems, and little training in substance abuse treatment. Research shows that in general social workers do not receive extensive education in substance abuse when attending academic education. About 7 percent of under graduate programs in the U.S., offer little training in substance abuse, about 8 percent of graduate schools offer such trainings, and 45 percent of the trainings were elective (Hall, Amodeo, Shaffer, & Vander Bilt, 2000).

According to Thomas Gregoire, child welfare faces many problems related to substance abuse, and many workers have minimum academic training to deal with these issues. Emphasis to continue to enhance worker's knowledge in this subject is imperative in order to facilitate better assessment opportunities when working with substance abusive clients. Although this problem is significant within child welfare, workers know little about how to assess substance abuse and have minimum knowledge about intervention and treatment programs. Social workers' academic experience lacks important knowledge in substance abuse; therefore they tend to avoid working with these clients. Thomas Gregoire proposes that social workers should continue to learn about substance abuse through training that can foster positive attitudes when working with substance abusing clients. Change in attitude would lead to a change in practice, thus improving the relationship with these clients.

Policies in the Welfare System

Current child welfare policies mandate child protection within the context of family preservation.

Substance abuse is a current challenge facing an already stressed child welfare system. The Adoption Assistance and Child Welfare Act of 1980 require that case plans be developed in order to address family circumstances placing children at risk. In many child welfare cases it is hard to determine whether reasonable efforts were made to address substance abuse problems. Social workers are usually improperly trained to identify the proper time to ask clients about drinking and drug use because they feel nervous or feel embarrassed about confrontation. They also lack interviewing skills for the assessment of chemical dependency, or lack knowledge about the effect of substance abuse on parenting. In some cases the workers may recognize substance abuse problems within a family; however, the case plan may not address the problem. The workers may lack knowledge of appropriate treatment resources or how to access those resources (Tracy, 1994).

Many families that come in contact with the child welfare system have problems with chemical dependency. Their young children have to deal with family dysfunction, violence, homelessness, crime, and poverty as a result of living with addicted parents. Experts in

the field of child abuse agree that there is a strong correlation between child maltreatment and substance abuse. Policy makers also need to be aware of the number of families that are affected by addiction. Child welfare agencies should be responsible in making the appropriate assessments of substance abuse within the family context. The assessment should include the family's functioning and behavior including family support systems. Child welfare agencies should provide appropriate training to new employees on substance abuse to ensure that they are skilled in this area. Periodic in-house training should be provided to enhance the workers ability to identify substance abuse problems (CWLA, 1997).

Policy reform and policy makers have begun to pay attention to the issue of substance abuse and child maltreatment. Restructure of the child welfare system is currently taking place. Preventive programs are currently been implemented in partnership between child welfare and health agencies to address issues of substance abuse. Increased accountability with respect to service delivery is also a focus for administrators and practitioners. The goal of this reform is to ensure children's safety and family preservation (Pecora et al., 2000, p. 16).

Theoretical Orientation

The theoretical approach utilized in this study was systems theory. Systems Theory focuses on the relationship among different living systems such as molecules, organs, individuals and groups. A system in general refers to elements and the interaction with other forces or elements. Systems are not static but dynamic, this means that they constantly change.

This theory emphasizes that things or people are related and the actions of one affect the other. Within the context of this research project the focus is social workers' knowledge of substance abuse. Education was a system to be measured against social workers' knowledge in an attempt to find a correlation between the two. The proposal within this theory is that education may be a factor that contributes to social workers' knowledge weather the results are high or low, a relationship can be established.

In social work systems theory provides a framework that focuses the attention from cause and effect to a person, situation and the related relationship as a whole. In other words, social workers have to understand complex interactions between the client and all levels of

interaction within the societal context. In this case social workers should be able to interact with substance abusing clients. They also need to understand the meaning of each and every relationship that the client develops within the societal context and the changes occurred between all the relationships and connections (Turner, 1996).

Potential Contribution of Study to Micro and/or Macro Social Work Practice

This research addressed the knowledge or lack of knowledge that social service workers have about substance abuse. At the micro level, this research project gathered information from social service workers in order to measure their general knowledge about substance abuse. The purpose of this study was to bring awareness to the welfare system on the importance of extensive education and appropriate training of substance abuse by case workers.

At the macro level improving case workers ability to make the appropriate assessment in relation to client and substance abuse will benefit not only the individual family but society as well. At this level social workers in collaboration with substance abuse providers can

develop a plan of action for a recovery treatment program that can offer better success rates for their clients.

If substance abusing parents receive the appropriate assistance from case workers and the proper understanding to their addiction and recovery the family system could be reinstated. As soon as the substance abusing parents have achieved an appropriate level of sobriety they will become productive members of society, thus improving the quality of life for their families.

Summary

This chapter focused on the appropriateness of the paradigm chosen to perform the research project. This chapter contains information in relation to the Positivist paradigm, its theoretical approach as well as its function and performance in order to state a hypothesis. This chapter offers the reader substantial information that supports the study's validity based on recent literature information. It also focuses on the micro and macro levels which impact not only the individual but communities.

CHAPTER TWO

ENGAGEMENT

Introduction

This research project measured social workers' knowledge of substance abuse. This chapter focuses on the engagement strategies needed to carry out the project. Diversity issues as well as ethical and political issues are presented. Data gathering and analysis procedures are also presented.

Research Site and Study Participants

Data was gathered from five offices within the Department of Children's Services (DCS) in San Bernardino County. Social workers assigned to family reunification services were the sample for this research project. Family reunification is the planned process of reconnecting children or youth that have been placed in out of home care with their parents by offering parents a variety of services. These services offer families support to achieve and maintain a level of family connection, whether the children are placed back in the home or through on going visits. Family reunification is a dynamic process and one that needs to remain flexible.

Its approach seeks to meet the family's needs by offering services such as substance abuse programs, parenting classes, anger management, and domestic violence awareness. It also focuses on respecting diversity, culture, race, and ethnicity.

Engagement Strategies for Each Stage of Study

In order to engage the social workers in this study the researcher communicated with the managers and supervisors who were the gatekeepers of the study site via email and phone contact to acquire access onto their premises. Open communication with the managers and supervisors included a brief introduction about the researcher and the main reason for choosing the research site. One of the reasons for choosing this particular site was that the researcher is already employed by the Department of Children's Services, thus making this an opportunity to test the hypothesis within the researcher's own agency.

An invitation to discuss the research topic was offered. An explanation of how the findings of the research project may benefit the research site was also discussed, and a formal agreement to have access to the

research site was obtained with the appropriate managers and supervisors (Morris, 2006).

Self Preparation

Minimum preparation was done before data gathering since no face-to-face contact was necessary. The researcher used a self-administered questionnaire that was interoffice mailed to the participants, thus eliminating any contact with the participants.

Diversity Issues

The research questions did not focus on gender or ethnicity. The researcher was sensitive to the social workers' amount of experience in the field of social work by designing a survey that focuses on substance abuse knowledge. It was expected during the research process that some of the workers participating in the study would have more experience in this field than other workers. In order to maintain a sensitive attitude about social workers' possible ignorance about substance abuse, the researcher created a survey that contained multiple-choice questions with several selections for answers. The survey did not have questions that compromised any issues in regards to ethnicity, culture,

gender, age, ability or sexual orientation. All the questions focused on chemical dependency, and the type of treatment programs available to address chemical dependency.

This research study was conducted in a survey format and the surveys were inter-office mailed to the selected DCS offices. Therefore, there was no personal contact between the researcher and the subjects, thus eliminating any potential differences between the researcher and the subjects.

Ethical Issues

This research focused on the social workers' knowledge of substance abuse. This research did not focus on the workers' competence to carry out case work. The survey contained questions about substance abuse, and about substance abuse treatment programs. This project did not ask questions about personal opinions or personal feelings in regards to the topic. The researcher also informed the workers participating in the study that the survey was confidential and that their names were not necessary, thus ensuring anonymity. In order to ensure confidentiality and anonymity the surveys were sent to

the perspective research site inside a sealed white envelop that contained a copy of the survey, a copy of the debriefing statement, a copy of the informed consent as well as the gift card. All of these items were then put inside a manila enveloped and then sent to the research site via interoffice mail. The researcher did not ask the workers for opinions based on client participation in substance abuse, or the success or failure rates in addressing substance abuse. This research does not intend to measure the workers' competency, rather their knowledge of substance abuse.

Political Issues

The debriefing statement offered an explanation regarding the purpose of the study and what the focus of the study entailed. The study focused on the knowledge of substance abuse and not on labeling the workers as incompetent or ignorant. This research was not performed with the intent to offend the workers when addressing their knowledge in substance abuse, but it did ask questions designed to elicit information from the workers knowledge about the subject.

This research aimed to bring useful information to the sponsors (San Bernardino County Department of Children's Services) about substance abuse knowledge among social workers. The research outcome may find that no new training is needed for the social workers about substance abuse. And it may demonstrate that social workers within San Bernardino County are well prepared to provide appropriate assistance to families with substance abusing parents. The researcher had minimum contact with the subjects since the research was conducted as a survey format. The researcher contacted the managers and supervisors via email and sent the surveys via inter-office mail in order to have the surveys distributed to the workers. The supervisors assisted in the distribution process as well as ensuring that the surveys were returned to the researcher, via interoffice mail.

Summary

This chapter focused on the engagement strategies needed to perform the research project. It focused on diversity issues as well as ethical and political issues. Data gathering and distribution was presented as well as

information obtained to support the validity of this project.

CHAPTER THREE

IMPLEMENTATION

Introduction

This chapter contains a description of the data gathering process. This chapter describes how the researcher selected the subjects, distributed the surveys, and implemented the surveys. It describes who assisted in the implementation of the surveys and how the surveys were returned to the researcher in order to minimize physical contact with the subjects.

Selection of Participants

The social workers were selected using purposive sampling from five different offices within DCS. Purposive sampling refers to a selection of participants that can provide the most complete data about the study focus, in this case knowledge of substance abuse. Participants in this project were social workers from The Department of Children's Services (DCS), San Bernardino County.

The researcher contacted supervisors via email from five selected DCS offices. The supervisors were asked to purposively select social workers assigned to family

reunification services within their units of supervision. The supervisors were instructed to ask social workers to participate in the research project in exchange for a five-dollar gift card to "Starbucks" coffee. The researcher sent out a total of forty surveys which were distributed as follows: Three offices received ten surveys and two offices received five surveys each. The reason for this distribution was due to the number of social workers per office. Two of the offices have fewer workers that are assigned to reunification services than the other three offices. The workers selected were social service practitioners that were assigned cases for reunification services. A Social service practitioner is usually a master's level social worker. However, there are some social service practitioners with a bachelor's level education. Additionally, social service practitioners are assigned reunification service cases since these cases involve legal action by the Juvenile Court System, and the Welfare and Institution Codes. Knowledge in the last two areas is imperative for reunification services.

The researcher provided the supervisors with a survey (Appendix A) and informed consent form (Appendix

B), for the workers to sign prior to the completion of the survey. A debriefing statement was also offered to the participants, containing a short explanation involving their participation in the study (Appendix C). At the conclusion of the survey the participants were asked to fill out an anonymous background survey in order to gather demographic information (Table 1).

The researcher gave the workers a gift certificate for \$5.00 to "starbucks" coffee in exchange for their cooperation and time. The gift certificates were provided to the workers by the supervisors once the completed surveys were returned. A demographics table is included in this section (See Table 1).

Table 1. Demographics

	N	%
Gender:		
Females	14	70.0
Males	5	25.0
Missing	1	5.0
Ethnicity:		
African American	6	30.0
Anglo	8	40.0
Asian	1	5.0
European	1	5.0
Latin/Hispanic	1	5.0
Other	3	15.0
Education:		
Bachelors Degree	3	15.0
Masters Degree	17	85.0
Age Mean: 43		
Length of time mean: 7.0		

Data Gathering

Phases of Data Collection

Once the social workers agreed to participate in the research, the supervisors provided them with a packet containing the survey. The survey contained a total of thirty questions, and twenty-eight were related to the most common drugs used in the market. The last two questions were related to substance abuse programs.

The packets also contained the debriefing statement along with consent to participate statement as well as a

demographics page. The social workers were informed by the supervisors that once they completed the survey they would turn them back to the supervisor in order to receive the gift card. Once the supervisors collected the surveys, they placed them in the manila enveloped provided and interoffice mailed them to the researcher's home office within DCS. This process eliminated any contact between the researcher and the subjects thus eliminating any type of influence by the researcher on the subjects.

Summary

This chapter described the survey implementation process, and its application. It also described who assisted in the distribution of the survey and how the social workers (subjects) were selected and provided the surveys. Once the surveys were completed and returned, the social workers were provided with a gift card to star bucks.

CHAPTER FOUR

EVALUATION

Introduction

This chapter describes the analysis of the data gathered. A statistical package for the social sciences (SPSS) was utilized to analyze the data. Interpretation of frequencies, univariate and bivariate analysis is provided in this chapter.

Data Analysis

Univariate analysis of frequencies was computed out in order to measure the frequencies of correct and incorrect answers as well as the percentage of each. This data showed the subjects' knowledge for each question. The data analysis also tested the study's hypothesis about Social workers' knowledge of substance abuse.

Data Interpretation

Results

Univariate Analysis: Substance Abuse Knowledge. The dependent variable measured the social workers' knowledge of substance abuse, against the independent variable, the workers' level of education. The results of the analysis

Table 2. Responses

	Correct	Incorrect Data	Missing
1. Maladaptive pattern:	4 (20%)	14 (70%)	2 (10%)
2. Tolerance achieved:	18 (90%)		2 (10%)
3. Withdrawal symptoms:	19 (95%)		1 (5%)
4. Alcohol and Drug use:	20 (100%)		
5. Ecstasy known as:	10 (50%)	10 (50%)	
6. Ecstasy facts:	12 (60%)	8 (40%)	
7. Physical Effects:	12 (60%)	7 (35%)	1 (5%)
8. Rohypnol Known as:	15 (75%)	3 (15%)	1 (5%)
9. Rohypnol Facts:	12 (60%)	8 (40%)	
10. Physical Effects:	15 (75%)	4 (20%)	1 (5%)
11. Cannabis Known:	18 (90%)	2 (10%)	
12. Cannabis Facts:	1 (5%)	18 (90%)	1 (5%)
13. Cannabis Effects:	14 (70%)	6 (30%)	
14. Cocaine, Crack Known:	17 (85%)	3 (15%)	
15. Cocaine, Crack Facts:	15 (75%)	5 (35%)	
16. Meth known:	16 (80%)	4 (20%)	
17. Meth Facts:	12 (60%)	8 (40%)	
18. Meth Effects:	14 (70%)	6 (30%)	
19. Crank Bugs:	8 (40%)	12 (60%)	
20. Heroin Known:	4 (20%)	16 (80%)	
21. Heroin Facts:	11 (55%)	9 (45%)	
22. Heroin Effects:	17 (85%)	3 (15%)	
23. Mushrooms known:	6 (30%)	13 (65%)	1 (5%)
24. Mushrooms Facts:	11 (55%)	9 (45%)	
25. Mushrooms Effects:	13 (65%)	7 (35%)	
26. Inhalants Known:	5 (25%)	15 (75%)	
27. Inhalants facts:	14 (70%)	6 (30%)	
28. Inhalants Effects:	8 (40%)	12 (60%)	
29. Screening tools:	20 (100%)		
30. Types of Programs:	20 (100%)		

demonstrated that 18 of the workers had scored between 16-26 correct answers from a total of 30 questions in substance abuse. Additionally, all twenty subjects answered the last two questions in the survey correctly.

Bivariate Analysis. A t-test was used to test the hypothesis. The sample size gathered was 20 social workers from five different offices. The t-value was computed by first obtaining the sample mean and the standard deviation. The sample mean was obtained by adding the scores of each test taken by the social workers and dividing the total score by the number of workers. Total score 382 was divided by sample size of twenty, thus giving the results of 19.1.

An independent sample t-test was conducted to compare the total scores for bachelor's degree and master's degree. There was no significance in scores for bachelor's degree ($M = 17.67$, $SD = 2.08$) and Master's degree ($M = 19.35$, $SD = 3.96$; $t(5.123) = -1.095$, $P = .322$).

Discussion

The total scores of the surveys showed that social workers within the Department of Children's Services

appeared to have high knowledge of substance abuse in general. Also, the results indicate that there is not a statistically significant difference between substance abuse knowledge when measured against the subject's education.

This project had a small sample of 20. The size could have had impact on the results. It is unknown if a bigger sample with a larger gender groups may have produced different results. Most of the subjects seemed to have a wide experience working in the field of social work.

The literature gathered for this project addressed education as a factor but mostly focused on "training" alone in substance abuse provided by the subject's employer. The literature did not address any other experiences the workers may have had regarding level of experience or expertise in the field of social work.

In this project, all the workers that participated were well educated and had many years of experience in the social work field especially with their current employer. Additionally, all of these workers had a number of years of experience working in reunification services thus providing an indication that the level of experience

in the field of social work may be significant if they were compared to the results of the project.

In this case is safe to state that the workers in San Bernardino County Department of Children's Services seemed prepared to service their clients in a proficient manner. They seemed knowledgeable in the subject of substance abuse; therefore it is safe to state that additional training in this subject may not be urgent or necessary at this time.

Another factor to be considered for future studies is the workers' participation in specific training offered by their employer. It is unknown if the workers have taken advantage of any trainings offered by San Bernardino County Department of Children's Services; since their length of employment is significant, perhaps their competent levels of knowledge could be related to appropriate training received during their years of employment.

Implications of Findings for Micro and/or Macro Practice

At the micro level there were no negative implications found. The results indicated that the social workers had a competent level of knowledge in substance

abuse which may provide a level of competence when working with substance abusing clients.

At the macro level there were no negative implications found. The results indicated that social workers within San Bernardino County have competent levels of knowledge in substance abuse which would benefit the community. Social workers would be able to provide competent and appropriate services to the community members they serve. Since the workers seem to have good knowledge in substance abuse, they would probably be able to communicate and work as a team with other agencies in the community that serve the same clients. The workers' knowledge in this study has a positive impact within the community as they would be able to offer appropriate service to community members.

Limitations of Study

The limitations encountered in the performance of this research were the limited number of subjects. Although forty surveys were sent to five offices selected within the Department of Children's Services, only twenty surveys were returned. The subjects were offered a five dollar gift card to star bucks coffee as an incentive to

participate in the research project. It is unknown at this time the reasons that hinder the participation of more workers in this project. It could have been time constraints or the lack of interest in participating in yet another research project even with a strong incentive such as a gift card to a popular coffee house.

Perhaps a larger number of surveys should have been sent to the offices in order to assure a bigger return. A larger sample could have provided a stronger outcome to the results. The only problem with sending more than forty surveys was that of financial constrain by the author of the project. The researcher only had the financial means to buy forty gift cards for five dollars each.

However, the results of this project indicated that the social workers surveyed had high knowledge of substance abuse, even if the sample size was small. The results indicated that the information obtained through the literature review is different from the results of this project. This project was able to prove that at least in San Bernardino County Department of Children's Services, the social workers are well educated in the subject of substance abuse.

Summary

This chapter focused on the statistical results of the project. This chapter explains the results and limitations of the project as well as any significant impact the project brought to the field of social work and the Department of Children's Services; in San Bernardino County.

CHAPTER FIVE

TERMINATION AND FOLLOW UP

Introduction

This chapter focused on the final presentation provided to the sponsors within San Bernardino County Department of Children's Services. The purpose of the presentation is to provide them with the study's results.

Communicating Findings to Study Site and Study Participants

A small presentation was provided to the managers and supervisors that assisted in the implementation of the research project. A handout with a summary of the results was provided to the managers and supervisors. The handouts provided the background information, methods, findings, and the interpretation of the results.

A discussion of the results was conducted in order to provide the sponsors with answers to their questions. At the end of the presentation, the sponsors were thanked for providing access to the premises where the research project took place.

Summary

This Chapter briefly discussed the process for termination of the project as well as the presentation provided to the sponsors within San Bernardino County Department of Children's Services.

APPENDIX A
DATA COLLECTION INSTRUMENT(S)

SUBSTANCE ABUSE SURVEY

1. A maladaptive pattern of substance use is manifested by:
 - a. Tolerance
 - b. Withdrawal
 - c. None of the above
 - d. All of the above
2. In order to reach the desired effect when tolerance has been achieved:
 - a. The amount of drug use has to be increased
 - b. The amount of drug use remains the same
 - c. The amount of drug use has to be diminished
3. Physical withdrawal symptoms are characterized by:
 - a. Shaking
 - b. Seizures
 - c. Anxiety
 - d. Depression
 - e. None of the above
 - f. All of the above
4. Problems associated with alcohol and drug use are:
 - a. Birth defects
 - b. Crimes
 - c. Child Abuse
 - d. Suicide
 - e. a and b only
 - f. All of the above
5. Ecstasy is commonly known as:
 - a. XTC
 - b. Lover's speed
 - c. Honey oil
 - d. a and b only
 - e. All of the above

6. Facts about Ecstasy:
 - a. Is a synthetic
 - b. Is chemically similar to methamphetamine
 - c. Has a high risk of addiction
 - d. Is often found in tablet form stamped with icons
 - e. None of the above
 - f. All of the above
7. Physical effects of Ecstasy:
 - a. Enhances tactile sensitivity
 - b. Has no physical effects when taken for long periods of time
 - c. It causes neuropsychiatric disorders such as depression, anxiety, paranoia
 - d. Is a rapidly acting anesthetic
 - e. a and c only
 - f. b and d only
8. Rohypnol is commonly known as:
 - a. Roofies
 - b. Kit-kat
 - c. Lover's speed
 - d. All of the above
9. Facts about Rohypnol:
 - a. Is known as a "date rape"
 - b. Its effects are not enhanced by alcohol
 - c. Does not lead to physical and/or psychological dependence
 - d. All of the above
10. Physical effects of Rohypnol:
 - a. Does not cause amnesia in users/victims
 - b. May cause drowsiness, dizziness and confusion
 - c. Is not known to cause muscle relaxation, headaches, nightmares or tremors
 - d. All of the above

11. Cannabis is commonly known as:
- a. Marijuana
 - b. Pot
 - c. Mary Jane
 - d. Reefer
 - e. a and b only
 - f. All of the above
12. Facts about Cannabis:
- a. The primary active ingredient is Tetrahydrocannabinol (THC)
 - b. Is known to contain more than 200 chemicals
 - c. Is mostly smoked
 - d. All of the above
13. Physical effects of Cannabis:
- a. It causes more vivid sense of sight, smell, taste and hearing
 - b. Users are usually hyper and experience more energy
 - c. High doses can induce hallucinations
 - d. a and c only
 - e. a and b only
14. Cocaine and Crack are commonly known as:
- a. Coke
 - b. Snow
 - c. Mouth candy
 - d. a and b only
 - e. b and c only
15. Facts about Cocaine and Crack:
- a. Can be snorted, injected or smoked
 - b. A cocaine high last about 5 to 20 minutes
 - c. A crack high last only a few minutes
 - d. Repeated use causes insomnia, hallucinations, seizures and paranoia
 - e. All of the above
 - f. a and d only

16. Methamphetamine is commonly known as:
- a. Speed
 - b. Crystal
 - c. Crank
 - d. Ice
 - e. a and b only
 - f. All of the above
17. Facts about Methamphetamine:
- a. It affects the Central Nervous System
 - b. Is not highly addictive
 - c. Is used to treat ADHD and Obesity
 - d. Is only taken orally
 - e. a and c only
 - f. a and d only
18. Physical effects of Methamphetamine:
- a. Skin ulcers, anorexia and tooth decay
 - b. Withdrawal causes depression, anxiety and aggression
 - c. It offers a sense of well being and relaxation
 - d. a and b only
 - e. All of the above
19. "Crank Bugs" is refer as a side effect which causes:
- a. Itching and open sores of the skin
 - b. Real bugs crawling in user's skin
 - c. Hallucinations of insects crawling under the skin
 - d. a and c only
 - e. All of the above
20. Heroin is commonly known as:
- a. Hell dust
 - b. Glass
 - c. Smack
 - d. Nose drops
 - e. a c and d only
 - f. All of the above

21. Facts about Heroin:
- a. Is an Opiate from the Opium Poppy seed
 - b. The main ingredient is Morphine
 - c. Is used by injecting, smoking or snorting
 - d. a and c only
 - e. All of the above
22. Physical Effects of Heroin:
- a. Is not addictive
 - b. It causes depression of Central Nervous System
 - c. Users are at risk of contracting HIV and hepatitis
 - d. b and c only
 - e. All of the above
23. Mushrooms are commonly known as:
- a. Mushies
 - b. Shags
 - c. Jive
 - d. Shrooms
 - e. a and d only
 - f. All of the above
24. Facts about Mushrooms:
- a. It causes Hallucinations
 - b. Mushrooms are not toxic
 - c. Mushrooms are typically consumed raw, cooked, brewed or dried
 - d. a and c only
 - e. All of the above
25. Physical Effects of Mushrooms:
- a. Produces hallucinations
 - b. Induces panic attacks
 - c. Increases heart rate
 - d. Induces impaired judgment and motor skills
 - e. a and b only
 - f. All of the above

26. Inhalants are commonly known as:
- a. Huffing
 - b. Sniffing
 - c. Poppers
 - d. Snappers
 - e. All of the above
 - f. a and b only
27. Facts about Inhalants:
- a. Is a Central Nervous System depressant
 - b. Inhalants are snorted, sniffed, huffed and bagged
 - c. Inhalants are not flammable
 - d. All of the above
 - e. a and b only
28. Physical Effects of Inhalants:
- a. Decreases headaches, nausea, anxiety and depression
 - b. Intoxication effects are long lasting
 - c. Decreases blindness
 - d. It causes a rash around nose and mouth
 - e. All of the above
29. The access to substance abuse screening tools:
- a. Are not necessary
 - b. Are helpful in identifying addiction
 - c. Are a waste of time
 - d. All of the above
30. Types of substance abuse programs:
- a. 12-Steps
 - b. In patient
 - c. Outpatient
 - d. None of the above
 - e. All of the above

APPENDIX B

INFORMED CONSENT

INFORMED CONSENT

The study in which you are being asked to participate is designed to investigate "Substance Abuse". This study is being conducted by Mirta E. Johnson under the supervision of Dr. Teresa Morris & Dr. Tom Davis, PROFESSORS OF Department of Masters of Social Work. This study has been approved by the Department of social work subcommittee of the Institutional Review Board, California State University, San Bernardino.

In this study you will be asked to respond to several questions about substance abuse. The survey should take about _15_ to _30_ minutes to complete. All of your responses will be held in the strictest of confidence by the researcher. Your name will not be reported with your responses. All data will be reported in-group form only. You may receive the results of this study upon the completion of the study, at the following location: California State University San Bernardino, Library.

Your participation in this study is totally voluntary. You are free not to answer any questions and withdraw at any time during this study without penalty. When you have completed the survey, you will handed in to the supervisor and receive a debriefing statement describing the study in more detail as well as receiving a gift card to Starbucks Coffee. In order to ensure validity of the study, we ask that you do not discuss this study with other participants.

There are no foreseeable risks attached to this study, all information will be strictly confidential. This study hopes to bring awareness to social workers in the subject of substance abuse. The study is designed to measure substance abuse knowledge among child welfare social workers actively involved in the reunification process with substance abusing parents.

If you have any questions or concerns about this study, please fell free to contact Dr. Teresa Morris or Dr. Tom Davis at (909)-537-3839 or (909) 537-5561.

By placing a check mark in the box below, I acknowledge that I have been informed of, and that I understand, the nature and purpose of this study, and I freely consent to participate. I also acknowledge that I am at least 18 YEARS OF AGE.

Please Place Mark: _____

Date: _____

APPENDIX C
DEBRIEFING STATEMENT

DEBRIEFING STATEMENT

This study is designed to investigate Social Workers' Knowledge of Substance Abuse. The survey will be analyzed and the results will provide an indication of the level of knowledge of substance abuse by child welfare workers.

This study will provide an opportunity to measure social workers' knowledge of substance abuse and is not intended to measure social workers' competency in case/work performance. The results of the study will provide an indication that social workers need to increase their knowledge of substance abuse if necessary, or it will indicate that they have proper knowledge of substance abuse, thus not requiring further education.

Thank you for your participation and for not discussing the contents of the research with other participants. If you have any questions about the study, please feel free to contact **Dr. Teresa Morris or Dr. Tom Davis at (909) 537-3839 or (909) 537-5561**. If you would like to obtain a copy of the results of this study, they will be available in the library at California State University, San Bernardino after September 2007.

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